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BEFORE THE
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against: **CAMILLE YVETTE HALL** **17776 Calle Capistrano** **Moreno Valley, CA 92551** **Registered Nurse License No. 586051** Respondent.	Case No. 2011-136 **ACCUSATION**

Complainant alleges:

PARTIES

1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her official capacity as the Interim Executive Officer of the Board of Registered Nursing, Department of Consumer Affairs.

2. On or about August 22, 2001, the Board of Registered Nursing issued Registered Nurse License Number 586051 to Camille Yvette Hall (Respondent). The Registered Nurse License was in full force and effect at all times relevant to the charges brought herein and will expire on January 31, 2011, unless renewed.

JURISDICTION

3. This Accusation is brought before the Board of Registered Nursing (Board), Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

4. Section 2750 of the Business and Professions Code ("Code") provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.

5. Section 2764 of the Code provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license.

6. Section 2811(b) of the Code provides, in pertinent part, that the Board may renew an expired license at any time within eight years after the expiration.

STATUTORY AND REGULATORY PROVISIONS

7. Section 2761 of the Code states:

> The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:
>
> (a) Unprofessional conduct, which includes, but is not limited to, the following:
>
> (1) Incompetence, or gross negligence in carrying out usual certified or licensed nursing functions.
>
> . . . .

8. Title 16, California Code of Regulations, section 1442, provides:

> As used in Section 2761 of the code, "gross negligence" includes an extreme departure from the standard of care which, under similar circumstances, would have ordinarily been exercised by a competent registered nurse. Such an extreme departure means the repeated failure to provide nursing care as required or failure to provide care or to exercise ordinary precaution in a single situation which the nurse knew, or should have known, could have jeopardized the client's health or life.

9. Title 16, California Code of Regulations, section 1443, provides:

As used in Section 2761 of the code, "incompetence" means the lack of possession of or the failure to exercise that degree of learning, skill, care and experience ordinarily possessed and exercised by a competent registered nurse as described in Section 1443.5.

10. Title 16, California Code of Regulations, section 1443.5, provides:

A registered nurse shall be considered to be competent when he/she consistently demonstrates the ability to transfer scientific knowledge from social, biological and physical sciences in applying the nursing process, as follows:

(1) Formulates a nursing diagnosis through observation of the client's physical condition and behavior, and through interpretation of information obtained from the client and others, including the health team.

(2) Formulates a care plan, in collaboration with the client, which ensures that direct and indirect nursing care services provide for the client's safety, comfort, hygiene, and protection, and for disease prevention and restorative measures.

(3) Performs skills essential to the kind of nursing action to be taken, explains the health treatment to the client and family and teaches the client and family how to care for the client's health needs.

(4) Delegates tasks to subordinates based on the legal scopes of practice of the subordinates and on the preparation and capability needed in the tasks to be delegated, and effectively supervises nursing care being given by subordinates.

(5) Evaluates the effectiveness of the care plan through observation of the client's physical condition and behavior, signs and symptoms of illness, and reactions to treatment and through communication with the client and health team members, and modifies the plan as needed.

(6) Acts as the client's advocate, as circumstances require, by initiating action to improve health care or to change decisions or activities which are against the interests or wishes of the client, and by giving the client the opportunity to make informed decisions about health care before it is provided.

COST RECOVERY

11. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

FACTUAL ALLEGATIONS

12. Respondent was employed as a registered nurse for approximately 5 years in the Emergency Room of Riverside County Regional Medical Center in the City of Moreno Valley, California. On November 11, 2008, Respondent received a patient (MR # 0155680) with a history of diabetes into one of her assigned beds at approximately 1530. Since Respondent was in a conference with her supervisors, another nurse triaged the patient. The nurse assessed the patient and found that the patient had a fever of 102.6 Fahrenheit, an elevated heart rate of 127, elevated glucose of 223, abdominal pain of 10 on a scale of 10 and a right foot wound with maggots present. Respondent resumed care of this patient at approximately 1545. Respondent charted at 1545 that the "nurse assessment was completed, no distress, placed on monitor, waiting for MD" and at 1550 that "Dr. Hammel at bedside for consult." At 1730, Respondent charted that she medicated the patient for pain with Dilaudid 1 mg IVP. At 1800, Respondent charted "pt sleeping, no reaction noted from medication, no distress." Respondent's last documentation at the shift change was at 1900 when she charted that "report given to Candace R.N." When the nurse taking over care of the patient then assessed the patient, she found the patient moaning with pain to his abdomen and bilateral lower extremities a 10 on a scale of 10. He also had chills and a fever of 104.8 Fahrenheit. His wound on his right foot was exposed with a dirty dressing hanging off and maggots falling on the floor.

13. Respondent did not monitor and document the vital signs of the patient who had an elevated temperature and an elevated heart rate. This failure to continually monitor abnormal vital signs did not allow for appropriate evaluation and interventions early on, which then increased the patient's risk for developing serious complications. Respondent also failed to obtain a doctor's order for Tylenol for her patient who was febrile, placing the patient at risk for dehydration, tachycardia, seizures and possible death. Respondent did not properly administer pain medication nor did she reassess the patient appropriately after giving the patient pain medication. This caused the patient to suffer continued pain which can cause both physical, as well as psychological responses that could be extremely detrimental to the patient.

14. Respondent did not render any evaluation or treatment of the patient's right foot wound containing maggots. She did not clean it nor did she assess the wound, i.e., measure and take photos of it. This failure to immediately assess, document and treat the patient's infected wound placed the patient at an increased risk for developing a systemic infection which can be fatal, particularly since the patient was compromised by a high fever and elevated glucose levels. Respondent admitted that she did not provide appropriate care for the patient because of "fear of maggots covering the wound."

FIRST CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Gross Negligence)

15. Respondent is subject to disciplinary action for unprofessional conduct under section 2761(a)(1) of the Code within the meaning of California Code of Regulation section 1442, in that Respondent was grossly negligent when she failed to provide care or to exercise ordinary precaution which Respondent knew or should have known could have jeopardized the patient's health or life, as is set forth in paragraphs 12-14, incorporated herein by reference.

SECOND CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Incompetence)

16. Respondent is subject to disciplinary action for unprofessional conduct under section 2761(a)(1) of the Code within the meaning of California Code of Regulation sections 1443 and 1443.5, in that Respondent was incompetent in failing to exercise the degree of learning, skill, care and experience ordinarily needed to care for her patient, as is set forth in paragraphs 12-14, incorporated herein by reference.

THIRD CAUSE FOR DISCIPLINE

(Unprofessional Conduct)

17. Respondent is subject to disciplinary action under section 2761(a) of the Code in that Respondent's actions constituted unprofessional conduct, as is set forth in paragraphs 12-14, incorporated herein by reference.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

1. Revoking or suspending Registered Nurse License Number 586051, issued to Camille Yvette Hall;

2. Ordering Camille Yvette Hall to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3;

3. Taking such other and further action as deemed necessary and proper.

DATED: 8/17/10

Louise R. Bailey

LOUISE R. BAILEY, M.ED., RN
Interim Executive Officer
Board of Registered Nursing
Department of Consumer Affairs
State of California
Complainant

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